

The Involuntary Drug and Alcohol Treatment Program Referral and Screening Process

What is the Involuntary Drug and Alcohol Treatment Program?

The Involuntary Drug and Alcohol Treatment (IDAT) Program provides short term care, with an involuntary supervised withdrawal component, to protect the health and safety of people with severe substance dependence who have experienced, or are at risk of, serious harm and whose decision making capacity is considered to be compromised due to their substance use.

The IDAT Program is a structured drug and alcohol treatment program that provides medically supervised withdrawal, rehabilitation and supportive interventions for Identified Patients (IPs)

The *NSW Health Drug and Alcohol Treatment Act 2007* (DAT Act) provides the legislative basis for IDAT. The DAT Act “provides for the health and safety of persons with severe substance dependence through involuntary detention, care, treatment and stabilisation”.

The DAT Act aims to ensure that involuntary treatment is only used when it will be in the best interests of the individual and when no other less restrictive means for treating them are appropriate. The DAT Act also protects the rights of people while they are undergoing involuntary treatment.

The DAT Act is accompanied by:

- A Memorandum of Understanding, which sets out the roles and responsibilities of key NSW Government agencies involved in IDAT
- A Model of Care, which contains specific protocols regarding the medical management and psychosocial interventions during treatment.

Terms of Use in the Referral Process

Identified Patient (IP)

A person who is identified as potentially suitable for the Program. The person may be identified by anyone. Once identified, the Treatment Centre, medical practitioner or ITLO may be contacted regarding getting the person assessed for the Program.

Note: that the Act uses the term “person”, whereas the Model of Care document refers to a “patient”.

Dependency Certificate (DC)

A certificate issued by an AMP following a final assessment of a referred person, which states that the person meets the eligibility criteria for the Involuntary Drug and Alcohol Treatment Program (IDAT Program) and may be detained for treatment under the *Drug and Alcohol Treatment Act (2007)*.

Dependent Person (DP)

A person who is assessed by an AMP to be eligible for a Dependency Certificate.

Involuntary Treatment Liaison Officer (ITLO)

A qualified professional, including doctors or nurses who are trained, have at least five years experience of providing direct drug and alcohol patient care and skilled to assess and screen persons who may be eligible for a Dependency Certificate under the *Drug and Alcohol Treatment Act (2007)*. An ITLO conducts screening, triage and assessment to a standard of, and in liaison with, the Treatment Centre and AMPs to determine if a person should be recommended for referral for assessment by an AMP for a Dependency Certificate.

Note: a medical practitioner must make the referral for assessment for a dependency certificate, if the ITLO is a medical practitioner, s/he may make a referral.

Accredited Medical Practitioner (AMP)

An appropriately qualified medical professional, delegated by the Director General NSW Health, and appropriately accredited to issue Dependency Certificates, under the *Drug and Alcohol Treatment Act (2007)*.

Medical Practitioner (MP)

Referrals to AMPs for assessment for a Dependency Certificate may only be received from medical practitioners. AMPs require information on the Identified Person prior to final assessment of the referred patient, thus once a referral is received the AMP will forward a screening request to the medical practitioner which the MP may either complete or contact their local ITLO requesting assistance with screening and assessment for eligibility for involuntary treatment under the Act.

Screening, Assessment & Information Gathering

If an ITLO comes into contact with a potential involuntary patient through their drug and alcohol practice, or receives notification of a person who has been identified as potentially suitable for the program, an initial screening and information gathering process will be undertaken by the ITLO. This should be to the standard required of the AMP to establish whether a patient should be recommended for referral by a medical practitioner for a Dependency Certificate assessment. AMPs will rely on the screening work and comprehensive assessments of ITLOs to assist them gather the information and evidence they need to conduct an assessment for a Dependency Certificate.

The initial screening and information gathering process involves considering whether the patient meets or, on further assessment, is likely to meet the high level criteria and threshold for the Program. This involves considering:

- whether the patient has a severe substance dependence (has a tolerance, shows withdrawal symptoms when they stop using, has lost capacity to make decisions)
- that care, treatment or control is necessary to protect the patient (or others) from serious harm
- that the patient is likely to benefit from treatment but has previously refused treatment
- that there are no other less restrictive treatment options.

Screening and information gathering also includes a comprehensive and well documented risk assessment to determine risk to self or others, including the risk of suicide, risk to dependent children and of domestic violence.

In order to determine if a person should be recommended to a medical practitioner for referral for a Dependency Certificate assessment by an AMP, additional information is required. To inform a comprehensive assessment patient information will need to be gathered through review of medical records and by requesting information from specialist drug and alcohol and other services such as other health and social services specialities and police who might be involved with the patient.

It is not necessary for the screening assessment to involve contact with the patient, although this may be appropriate if the patient is already a patient of the ITLO, medical practitioner or the AMP. It may also be appropriate to seek additional information from known family members, carers or guardians, particularly where these individuals have been involved in identifying the person as potentially suitable for referral to the Program. It is important that the expectations of family members, carers or guardians are managed carefully in the case the identified person does not meet the eligibility criteria. Multidisciplinary input will be required to determine the recommendation for a referral for a Dependency Certificate assessment based on information gathered through the screening assessment. This may require a multi-disciplinary case conference involving professionals already involved in the patient's care, as well as the AMP and the professional with delegated responsibility (medical practitioner and ITLO) for undertaking screening and information gathering.

Screening should commence within two working days of a referral. The aim is for screening to be completed within one week of commencement, however it is recognised that this may not be possible in all cases.

Screening and Information Gathering Checklist

The following information should be gathered during this stage in order to make a determination about likely recommendation for referral for a Dependency Certificate assessment and possible treatment options:

- current and previous history of drug and alcohol use and impact on functioning and capacity
- current and previous treatment history, including history of withdrawal and previous complications
- current overview and history of physical and mental health
- psychosocial issues that need to be addressed, e.g. homelessness
- involvement in the criminal justice system and details of bail or community sentencing conditions and pending court dates. This is noting that the patient should be accepted onto the program if charges are pending, except in cases of significant violence or sexual offences (i.e. that put staff and other patients at risk of harm by that patient)
- risk of harm to self and to others, including children living with the patient
- other risk factors, such as pregnancy
- willingness of the patient to engage in treatment voluntarily
- availability of less restrictive treatment options that can be accessed
- identification of key significant others, e.g. family, carer, guardian
- identification of likely local case coordinator (to coordinate care post discharge from the in-patient phase of the Program)
- identification of a GP.
- Standardised, validated tools should be used wherever possible, and particularly relating to evaluation

On completion of the information gathering, screening and comprehensive assessment process the ITLO makes a recommendation to a medical practitioner as to whether the person should be referred to the AMP for a Dependency Certificate assessment. A medical practitioner must make the referral to the AMP and an ITLO can do this if s/he is a medical practitioner.

Information gathered during this stage and the outcome of the screening and information gathering must be well documented and clearly linked to the decision to refer for a Dependency Certificate assessment.

If a patient is referred for a Dependency Certificate assessment, a face to face (including video-conference) meeting with the AMP is to be arranged, to take place as soon as possible.

If a patient is not considered suitable for a Dependency Certificate the reasons for this decision are documented and explained to the referrer and ITLO, and alternative treatment/ intervention options are suggested. This might include:

- referral or sign posting to an alternative service, and/or
- providing information to the referrer and/or ITLO to enable them to educate family members (from whom the referral request may have originated) to support them to promote rehabilitation, recovery and reduce risk of relapse to crisis and risk of serious harm.

The outcome of the referral and screening assessment must be notified to the referrer/ITLO as soon as possible after receiving the referral.

Required Skills, Knowledge and Behaviour

Required clinical competencies at this stage generally relate to assessment and include:

- gathering information
- undertaking screening and triage
- clinical decision making, including identifying and prioritising need.

Knowledge and experience of these competencies in relation to patients with drug and alcohol, mental health and complex and multiple needs is essential.

In addition, activities at this stage need to be supported by administrative competence and experience in inputting, managing, monitoring and reporting data in relation to referrals.

Referral

Patients may be identified as potentially suitable for the Program by anyone, but the IP must be referred by a medical practitioner to an Accredited Medical Practitioner.

Once the AMP at the Treatment Centre has received a referral, a determination will be made as to whether there is sufficient information (a local comprehensive assessment) for the AMP to assess the IP for a Dependency Certificate. If not, further screening and a comprehensive assessment at the local level will be requested of the medical practitioner and local ITLO. Contact details of local ITLOs will be provided to the medical practitioner for liaison regarding further drug and alcohol screening and assessment needs.

Involuntary Treatment Liaison Officer (ITLO) may be:

- at the statewide in-patient unit (for patients residing in areas where the in-patient units are located), or
- part of the Referring Person's Network (for patients residing in other areas in NSW),

Referrals to an AMP for assessment for a dependency certificate can be made by phone, fax or email and can only be received from medical practitioners, for example, General Practitioners (GPs), emergency doctors and psychiatrists.

The referral is logged by a medical practitioner, recording the time, date and details of the referral, in line with reporting requirements. A written acknowledgement for the referral must be provided to the referrer within a working day of receiving the referral.

Need more information?

If you require additional information, please contact: *ADIS (Alcohol and Drug Information Service) at 9361 8000 or 1800 422 599 (outside Sydney); or*

More information can also be found on the Health website along with all the necessary forms required to screen, assess and refer a patient for the IDAT Program.

<http://www.health.nsw.gov.au/mhdao/legislation.asp>

You can also participate in online learning about the IDAT Program by visiting;

<http://lms.acwa.asn.au/login/index.php>

user name: idat password: ccwt1

